

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Robin Alec Fairhurst											
Application No. 10/552,023											
Filed: July 27, 2006											
Title: Quinoline-2-one Derivatives for the Treatment of Airways Diseases											
Attorney Docket No. PR/4 -33154A/HO US-PCT	Art Unit: 1625										
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. (Note: pursuant to 37 CFR 10.57(c), a practitioner cannot authorize other registered practitioners to conduct interviews without consent of the client after full disclosure.) Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 60%;">Name</th> <th style="width: 40%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td>Basil S. Krikelis</td> <td style="text-align: center;">41,129</td> </tr> <tr> <td>Bryan Zerhusen</td> <td style="text-align: center;">54,566</td> </tr> <tr> <td>Patrick A. Walker</td> <td style="text-align: center;">58,734</td> </tr> <tr> <td>A. Jacqueline Wizeman</td> <td style="text-align: center;">62,307</td> </tr> </tbody> </table>		Name	Registration Number	Basil S. Krikelis	41,129	Bryan Zerhusen	54,566	Patrick A. Walker	58,734	A. Jacqueline Wizeman	62,307
Name	Registration Number										
Basil S. Krikelis	41,129										
Bryan Zerhusen	54,566										
Patrick A. Walker	58,734										
A. Jacqueline Wizeman	62,307										
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>											
SIGNATURE of Practitioner of Record											
Signature	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> </div> <div style="width: 40%;"> Date April 28, 2009 </div> </div>										
Name	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Leslie Fischer </div> <div style="width: 40%;"> Registration No., if applicable 58,393 </div> </div>										
Telephone	(862) 778-9308										

This collection of information is required by 1.31, 1.32 and 1.34. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.